

## STATE OF NEW HAMPSHIRE 2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

JUL 28 2017

**RECEIVED** 

NEW HAMPSHIRE DEPARTMENT OF STATE

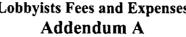
PLEASE PRINT Robert Quinn

1. Ivanic of Loobyi			<del> </del>		<del> </del>
II. Name of lobbyi	st's partnership, fir	m or corporation, if	any:		
N/ <i>H</i>	Associat	m or corporation)	ZEACT	ORS	
(1)	Name of partnership, fir	m or corporation)			
11 5aut	n Main	St (10	(400)	424	0521
Business Address:	(Street)	St. (on (Town/City)		(State)	(Zip Code)
(63) <u>225</u> ~	554 <b>1</b> e)	( )(Fa:	x) e	e-mail	
		ie – file separate repo 1 are not attributable			y file a separate report for
☐ All reportable to	ransactions occurring	; in the months prior to	the reporting	date relative to the	following client:
	(Full Name of Cli	ent as it appears on the L	obbyist Registra	ation Form)	
<u>OR</u>					
		byist (including the lo	bbyist's family	y), or the lobbying	firm listed below which are
unrelated to any par	rticular client.				
IV. Date of Report	t April 26, 2017	Г	Inly	26, 2017	,
-	<b>-</b>	istration to 3/31/17		m 4/1/17 to 6/30/17	
	October 25, 20	17 🗆	Janu	ıary 31, 2018 🗌	
	activity from 7/1/17	to 9/30/17	activity fro	m 10/1/17 to 12/31/1	17
	d, complete just this	d and no reportabl form and submit it to t			
VI. Check if additi	ional reports are att	ached:			
	_	kpenditures, you must	file Addendu	m A- Fees and Exp	penses
☐ If you have paid Expense Reimburse		eimbursed expenses, y	ou must file A	ddendum B– Rep	ort of Honorariums or
☐ If you, your fire	m, or your family has	made political contril	butions, you m	ust file Addendun	n C- Political Contribution
I have read RSA 15 and complete to the	best of my knowled	-C and RSA 664 and		or affirm that the form $\frac{2}{\sqrt{2}}$	pregoing information is true $\frac{2017}{2000}$
(Signature of lobby				(Date	)
Kubert	Quina	4.4.4			
(Print Name of lob	byist)				

## E R N T

## STATE OF NEW HAMPSHIRE

## **Lobbyists Fees and Expenses**



(RSA Chapter 15:6)

I. Name of Lobbyist(s) Robert Quin	
II. Name of lobbyist's partnership, firm or corporation, if any:	
NH ASSOC. Realtons (Name of partnership, firm or corporation)	
(Name of partnership, firm or corporation)	_
III. Name of Client	Date July 21, 201
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The groreduced by any expenses:  a) Total of all fees received in this reporting period  b) Total of all fees received this calendar year, prior to this reporting period	a) \$ 16,000  b) \$ 36,000
(This should equal the total of all prior monthly reports for this calendar yet)  c) Total of all fees received to date	
(Add lines a and b)	c)\$ 32,000
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repfees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report in Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of less being lobbied, purchase of a ceremonial object given to a person being lobbie (c) an itemized statement of each individual expenditure made during this reported any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greate restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported.	elient and if expenditures are made by may be filed for the lobbyist(s)/firm. aggregate total of all expenses paid expenses; (b) the aggregate total of all e: meals purchased during a business ss than \$10 that is given to the person d with a value of \$25.00 or less); and arting period of greater than \$25.00 for the of greater than \$25, purchase of a er than \$25, but not greater than \$50, expense reimbursement, or political
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$
c) Total of all itemized expenditures reported in detail in section VI.	c) \$

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$
f) Total of all expenses year to date	f) \$
VI. Other Expenses:  Provide the following detail for all expenditures of more than \$25 made from I period, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affir	m that the foregoing information
is true and complete to the best of my knowledge and belief.	
Kett Z	7/2///7 (Date)
(Signature of lobbyist)	(Date)
Robert ain	
(Print Name of lobbyist)	